

REMARKS

Status of the disclosure

The above amendment to the disclosure is made to include a “cross-reference to related applications” section in the present application.

Status of the claims

Claims 1-39 are in the case. Claims 1-39 were amended and claims 2 and 40-41 were cancelled. No new matter has been added. The amendments to the claims are being made to better comply with antecedent basis rules and for clarity purposes. Support for amendment to claim 1 is found in original claim 2.

Priority document

Applicant notes that the present Office Action makes no acknowledgment of a claim for foreign priority made to Canadian application no. 2,382,768 in the present application and makes no acknowledgement that a copy of the certified copy of this priority document was received from the International Bureau.

Applicant respectfully requests that such acknowledgment be made by the Examiner in his next correspondence relative to the present case.

Restriction requirement

By this Office Action, the Examiner has required restriction of the above-identified application to one of 4 inventions pursuant to 35 U.S.C. 1.499.

Responsive to the Requirement for Restriction, Applicant wishes to elect to prosecute the invention of Group II with traverse.

It is respectfully submitted that Groups I to III have at least one common special technical feature that is not disclosed by Gendron et al., namely the recital of NTPase's direct activity in the immune response and the ability of NTPase inhibitors to inhibit this activity. Group I is drawn to a screening assay for identifying a compound useful in the treatment of a disease or condition characterized by an immune cells disorder and is performed in an immune cell accordingly. Gendron et al. does not disclose a screening assay for a NTPase disorder performed in an immune cell and does not disclose NTPase's role in immune response. Group II is drawn to a method of inhibiting an immune cell activity with an NTPase inhibitor and Group III is drawn to a method of preventing a transplant rejection by administering an NTPase inhibitor.